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Transmittal Form
Change of Correspondence Address
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10/779,366

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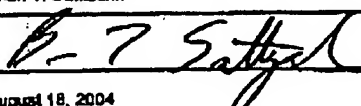
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/779,368	
	Filing Date	2/13/2004	
	First Named Inventor	Kantor, Arkady	
	Art Unit	2882	
	Examiner Name	Thomas, Courtney D.	
Total Number of Pages in This Submission	2	Attorney Docket Number	22177-0019

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Facsimile Transmission Change of Correspondence Address Application
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Firm or Individual name	McNees Wallace & Nurick LLC Brian T. Satzahn
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Date	August 18, 2004

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CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450.	Application Number	10/779,366
	Filing Date	2/13/04
	First Named Inventor	Kantor, Arkady
	Art Unit	2882
	Examiner Name	Thomas, Courtney D.
	Attorney Docket Number	22177-0010

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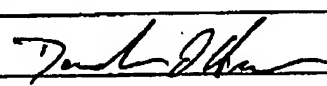
☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. Certificate under 37 CFR 3.73(b) is enclosed (Form PTO/SB/06).

☒ Attorney or agent of record. Registration Number 23,249.

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name Douglas J. Hura

Signature 

Date 8-17-04 Telephone 717-849-4466

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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Transmittal Form

Change of Correspondence Address Application

Attorney Docket No.: 22177-xxxx

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